September 1, 2015

The Honorable Amy Klobuchar
United States Senate
302 Senate Hart Building
Washington, DC 20510

Dear Senator Klobuchar:

On behalf of our nearly 5,000 member hospitals, health systems and other health care organizations, and our 43,000 individual members, the American Hospital Association (AHA) is pleased to express our support for your legislation, S. 1189, the Conrad State 30 and Physician Access Act. Your bill reauthorizes the Conrad 30 and makes other changes to the program to improve patient access to care.

Under current law, internationally educated non-U.S. citizen physicians admitted to the United States on a J-1 visa to participate in graduate medical education programs are required by section 212 (e) of the Immigration and Nationality Act (8 U.S.C. 1182(e)) to return to their home countries or last permanent residences for two years before they are eligible to apply for an immigration status allowing them to continue their work as physicians in the United States.

The Conrad State 30 Program allows state health departments to request J-1 visa waivers for up to 30 foreign physicians per year to work in federally designated Health Professions Shortage Areas or Medically Underserved Areas. First enacted in 1994 (Public Law 103-416), this program has been integral to bringing medical care to many of the most underserved areas of the country.

Access to health care is a critical issue for our nation. Currently, more than 20 million Americans live in areas where there is a shortage of physicians to meet the community’s medical needs. Our nation’s rural and inner city hospitals struggle to recruit and retain physicians, and the supply of primary care providers in such areas is steadily decreasing. In many areas of our nation, the Conrad State 30 physician is the only source of primary health care.

Unfortunately, the authorization for the Conrad State 30 Program remains temporary, and the latest extension will expire on Sept. 30. Without timely reauthorization, many communities that have benefited from a Conrad State 30 physician may find themselves without access to physician services. We urge that this program be extended before that deadline. We also support the enactment of the program improvements contained in S. 1189 as part of this extension.
S. 1189 would make the Conrad State 30 Program permanent, providing needed certainty for underserved areas. The bill also would increase the state allocations to 35 physicians per year and provide flexibility to further expand the number of waivers in states where the demand exceeds the limit. It also would provide a variety of technical improvements in the administration of the program based on more than 20 years of experience. Finally, the bill would clarify employer standards for using Conrad 30 physicians.

For these reasons, the AHA urges swift enactment of S. 1189. We stand ready to work with you and your colleagues to accomplish this goal.

Sincerely,

Thomas P. Nickels
Executive Vice President